

Intratracheal Suspension

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SURFAXIN®, THE ONLY AVAILABLE

SYNTHETIC ALTERNATIVE TO

ANIMAL-DERIVED SURFACTANTS APPROVED BY THE FDA

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WARMING CRADLE® USER'S MANUAL

Step-by-Step Guide



DOSING CHART

A Quick Reference for SURFAXIN Dosing



MONOGRAPH

A Comprehensive SURFAXIN Review



First U.S. FDA approved alternative to surfactants made with animal extract in more

SURFAXIN (lucinactant) Intratracheal

Drug Administration (FDA) for the

IMPORTANT SAFETY INFORMATION

developing RDS.

Suspension is approved by the U.S. Food and

prevention of respiratory distress syndrome (RDS) in premature infants at high risk for

SURFAXIN® (lucinactant) Intratracheal Suspension is intended for intratracheal

use only. The administration of exogenous surfactants, including SURFAXIN, can

ventilatory support can be modified to respond to changes in respiratory status.

rapidly affect oxygenation and lung compliance. SURFAXIN should be

administered only by clinicians trained and experienced with intubation,

ventilator management, and general care of premature infants in a highly



Neonatologists and parents share concerns regarding animal-derived medications



Direct clinical comparisons to Exosurf®, Survanta® and Curosurf® 1,2



Sinapultide (KL₄ peptide) mimics critical surfactant protein B function



Therapeutic precision from manufacturing through preparation to



VIDEOS

SURFAXIN Administration



WARMING CRADLE®



Supportive health economics data

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THE SURFAXIN® APP



Most common adverse reactions associated with the use of SURFAXIN are endotracheal tube reflux, pallor, endotracheal tube obstruction, and need for dose interruption. During SURFAXIN administration, if bradycardia, oxygen desaturation, endotracheal tube reflux, or airway obstruction occurs, administration should be interrupted and the infant's clinical condition assessed and stabilized.

supervised clinical setting. Infants receiving SURFAXIN should receive frequent clinical assessments so that oxygen and

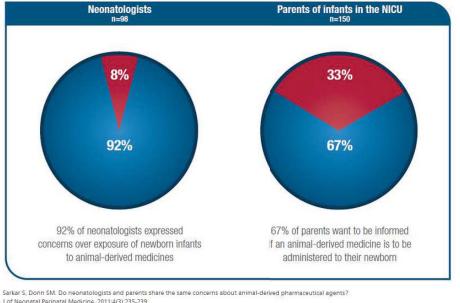
SURFAXIN is not indicated for use in acute respiratory distress syndrome (ARDS).

For more information about SURFAXIN, please see full prescribing information

MONOGRAPH

A Comprehensive SURFAXIN Review

Concerns About Animal-Derived Products



J of Neonatal Perinatal Medicine, 2011;4(3):235-239.

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auministration or exogenous surfactants, including SUKFAAIN, can rapidly affect oxygenation and lung compliance. SURFAXIN should be administered only by clinicians trained and experenced with intubation, ventilator management, and general care of premature infants in a highly supervised clinical setting: Infants receiving SURFAXIN should receive frequent clinical assessments so that oxygen and ventilatory support can be modified to respond to changes in respiratory status.

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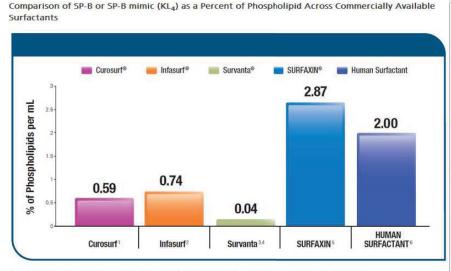
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¹Curosurf⁸ (poractant alfa) Intratracheal Suspension [prescribing information]. Cary, NC: Cornerstone Therapeutics Inc; 2009.

²Infasurf^o (calfactant) Intratracheal Suspension [prescribing information]. Amherst, NY: Ony Inc. 2009.

³Survanta^a (beractant) Intratracheal Suspension [prescribing information]. North Chicago, IL: AbbVie Inc. 2012.

⁴Notter RH, Wang Z, Egan EA, Holm BA. Component-specific surface and physiological activity in bovine-derived lung surfactants. Chem Phys Lipids. 2002;114(1):21-34.

SURFAXING (lucinactant) Intratracheal Suspension [prescribing information]. Warrington, PA: Discovery Laboratories Inc; 2012.

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Unlike animal-derived surfactants that are made with surfactant proteins extracted from animal lung, SURFAXIN® is a synthetic, peptide-containing surfactant manufactured to ensure a consistent level of SP-B mimic (KI4) is delivered with each recommended dose.(1)

1. SURFAXIN® (lucinactant) Intratracheal Suspension [prescribing information]. Warrington, #A: Discovery Laboratories Inc; 2012.





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